



John Umstead Hospital
1003 12th Street
Butner, NC 27509-1626

Organization Identification Number: 1606

Date(s) of Survey: 8/16/2007 - 8/17/2007

PROGRAM(S)

Hospital Accreditation Program

SURVEYOR(S)

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Executive Summary

As a result of the accreditation activity conducted on the above date , your organization must submit Evidence of Standards Compliance (ESC) within 45 days from the day this report is posted to your organization's extranet site. If your organization does not make sufficient progress in the area(s) noted below, your accreditation may be negatively affected.

The results of this accreditation activity do not affect any other Requirement(s) for Improvement that may exist on your current accreditation decision.

**The Joint Commission
Accreditation Survey Findings**

Requirement(s) for Improvement

These are the Requirements for Improvement related to the Primary Priority Focus Area :

Medication Management

Standard: MM.2.20

Program: HAP

Standard Text: Medications are properly and safely stored.

Secondary Priority Focus Area(s): N/A

Element(s) of Performance

Scoring Category : A

2. Medications are stored under conditions suitable for product stability.

Surveyor Findings

EP 2

Observed in Adult Admission Unit at John Umstead Hospital site.

During a tour of the medication room on unit 238, it was noted that an open vial of Candida Albicans Skin Test Antigen was in the refrigerator. The vial stated that the medication was to be dated and discarded in 30 days. The vial was not dated when opened.

Standard: MM.4.30

Program: HAP

Standard Text: Medications are labeled.

Secondary Priority Focus Area(s): N/A

Element(s) of Performance

Scoring Category : B

1. Medications are labeled in a standardized manner according to law or regulation and standards of practice.

Surveyor Findings

EP 1

Observed in Patient tracer at John Umstead Hospital site.

During a patient tracer it was observed that medications were labeled in two different methods. In one method, a printed label was affixed to a zip lock bag containing individual pills. In the second method individual pills were packaged with the patient's name on the unit dose label. Using two different labeling systems may lead to more administration errors than the use of a single labeling system.

Observed in Pharmacy tour at John Umstead Hospital site.

During the pharmacy tour it was observed that medications were labeled in two different methods. In one method, a printed label was affixed to a zip lock bag containing individual pills. In the second method individual pills were packaged with the patient's name on the unit dose label. Using two different labeling systems may lead to more administration errors than the use of a single labeling system.

**The Joint Commission
Accreditation Survey Findings**

Supplemental Findings

These are the Supplemental Findings related to the Primary Priority Focus Area of:

Assessment and Care/Services

Standard: PC.3.120
Program: HAP
Standard Text: The needs of patients receiving psychosocial services to treat alcoholism or other substance use disorders are assessed.

Secondary Priority Focus Area(s) N/A

Element(s) of Performance

Scoring Category : B

2. As appropriate to the patient's age and specific clinical needs, the psychosocial assessment includes information about the following:

Treatment acceptance or motivation for change
Recovery environment features that serve as resources or obstacles to recovery, including the use of alcohol and other drugs by family members
The patient's religion and spiritual orientation
Any history of physical or sexual abuse, as either the abuser or the abused
The patient's sexual history and orientation
Environment and home
Leisure and recreation
Childhood history
Military service history
Financial status
The patient's social, peer-group, and living situation
The patient's family circumstances, including the constellation of the family group
The patient's current living situation
Social, ethnic, cultural, emotional, and health factors

Surveyor Findings

EP 2

Observed in the ADATC at John Umstead Hospital site.

The design of the psychosocial assessment, as it exists in this program, calls for the collection of data about the various items listed in this EP; however, that information is not analyzed such that one can differentiate between different patients with similar surface problems, e.g., homelessness as acute versus chronic state and related patterns or factors contributing to it or deficit in coping skills. In addition, the analysis does not provide help in focusing treatment in a relatively short stay program. Thus, it is recommended that the psychosocial assessment process be redesigned so that a more individualized picture emerges regarding the significant variables affecting the person's life and/or expression of his or her diagnosis - and which ones require immediate focus.

Standard: PC.4.10
Program: HAP
Standard Text: Development of a plan for care, treatment, and services is individualized and appropriate to the patient's needs, strengths, limitations, and goals.

Secondary Priority Focus Area(s) N/A

Element(s) of Performance

**The Joint Commission
Accreditation Survey Findings**

Supplemental Findings

Scoring Category : B

1. Care, treatment, and services are planned to ensure that they are individualized to the patient's needs.

Surveyor Findings

EP 1

Observed in the ADATC at John Umstead Hospital site.

In two of the three treatment plans reviewed problems, goals and short term objectives were virtually identical. Discussion with staff indicated that they knew the differences in patients, and related differences in focus in individual sessions; however, the written plans do not reflect this knowledge. In the other plan reviewed, the approach of addressing person-centered goals resulted in some disconnect between other aspects of the clinical process as documented in the record, e.g., the assessment, the list of problems and so on. The organization reported that they are moving toward a new treatment plan and are working their way through some of these disconnects. Nevertheless, the current design does not appear to fully support individualized treatment planning based on an assessment that helps that (see comments for PC.3.120)

These are the Supplemental Findings related to the Primary Priority Focus Area of:

Patient Safety

Standard: EC.1.20

Program: HAP

Standard Text: The hospital maintains a safe environment.

Secondary Priority Focus Area(s) N/A

Element(s) of Performance

Scoring Category : B

1. The hospital conducts environmental tours to identify environmental deficiencies, hazards, and unsafe practices.

Surveyor Findings

EP 1

Observed in Building tour at John Umstead Hospital site.

During the building tour it was observed in the gero mall that the shower had a shower hose that could be used for self harm. There were electrical receptacles in patient rooms that were not hospital grade. In the Gero unit handicap bars in the toilet area were open all around their circumference.

**The Joint Commission
Accreditation Survey Findings**

Supplemental Findings

These are the Supplemental Findings related to the Primary Priority Focus Area of:

Rights & Ethics

Standard: RI.2.40
Program: HAP
Standard Text: Informed consent is obtained.

Secondary Priority Focus Area(s) N/A

Element(s) of Performance

Scoring Category : B

1. The hospital's policies describe the following:

Which, if any, procedures or care, treatment, and services provided require informed consent
The process used to obtain informed consent
How informed consent is to be documented in the record
When a surrogate decision maker, rather than the patient, may give informed consent
When procedures or care, treatment, and services normally requiring informed consent may be given without informed consent

Surveyor Findings

EP 1

Observed in Patient tracer at John Umstead Hospital site.

During a patient tracer of a patient receiving ECT the informed consent form was reviewed . There was no witness to the consent as required by CMS State Operations manual .

John Umstead Hospital

Organization ID: 1606

1003 12th StreetButner, NC 27509-1626

Accreditation Activity - Evidence of Standards Compliance 1 Form

Due Date: 10/19/2007

HAP Standard MM.2.20 Medications are properly and safely stored.

Surveyor EP 2 Observed in Adult Admission Unit at John Umstead Hospital site. During a tour of **Findings:** the medication room on unit 238, it was noted that an open vial of Candida Albicans Skin Test Antigen was in the refrigerator. The vial stated that the medication was to be dated and discarded in 30 days. The vial was not dated when opened.

Elements of Performance:

2. Medications are stored under conditions suitable for product stability.

Scoring A
Category:

Corrective Action Taken: John Umstead Hospital clinical leadership reviewed the hospital's medication policy to ensure that the practice of dating multi-dose vials is cleared stated in the policy. This is the case and no change in policy was required. On August 27, 2007, the JUH Director of Nursing issued a memo to all JUH licensed nursing staff regarding the dating of multi-dose vials for injectable medications. The memo stated that "at the time you open a multi-dose vial of medication, you must put a date on the vial. The medication is to be discarded after the manufacturer's recommended date, usually 28 or 30 days." This memo and requirement was also reviewed with senior nursing leadership at the 8/28/07 Unit Nurse Director meeting to ensure nursing leadership communicated this information and expectation to unit nursing staff.

Evaluation Method: JUH Nursing Services developed an audit tool that is used by nursing shift supervisors on each unit to check medication refrigerators to ensure multidose vials of medication are dated when opened. These audits began the week of 9/5/07. The measure of success will be calculated using the results of the medication refrigerator audits with the numerator being the number of opened vials that are dated in medication refrigerators divided by the total number of open multidose vials in the medication refrigerators. The audit results are submitted to the Director of Nursing who will calculate the measure of success and send the MOS compliance scores to the JUH Quality Management Dept. for submission to the Joint Commission after four months of data collection. The Nursing Dept will review the audit results at monthly Nursing QI meetings and identify additional improvement strategies, if indicated. The pharmacy staff also performs monthly inspections of medication refrigerators and check that there is a first -entry date on all open vials. Pharmacy staff will notify the Unit Nurse Director and the DON for any medication refrigerators out of compliance.

Measure of
Success Goal 100
(%):

HAP Standard MM.4.30 Medications are labeled.

Surveyor EP 1 Observed in Patient tracer at John Umstead Hospital site. During a patient tracer
Findings: it was observed that medications were labeled in two different methods. In one method, a printed label was affixed to a zip lock bag containing individual pills. In the second method individual pills were packaged with the patient's name on the unit dose label. Using two different labeling systems may lead to more administration errors than the use of a single labeling system. Observed in Pharmacy tour at John Umstead Hospital site. During the pharmacy tour it was observed that medications were labeled in two different methods. In one method, a printed label was affixed to a zip lock bag containing individual pills. In the second method individual pills were packaged with the patient's name on the unit dose label. Using two different labeling systems may lead to more administration errors than the use of a single labeling system.

Elements of Performance:

1. Medications are labeled in a standardized manner according to law or regulation and standards of practice.

Scoring
Category: B

Corrective Action Taken: The JUH pharmacy dispenses first dose medications in a zip lock bag with a label generated by the pharmacy computer system which is then affixed to the zip lock bag by pharmacy staff. This label differs slightly from the printed label that is produced by the automatic dispensing machine (ADM) that packages all unit dose medications, except first dose medications. The dispensing label for first dose medications affixed to the zip lock bag lists the dosage (e.g. 60 mg = 1 tab), while the ADM medications do not list the dosage. To ensure the labels on the zip lock bag match the labels on the ADM packaged medication, the pharmacy computer system was reprogrammed to eliminate the listing of the dosing information. The revised labels began being generated by the pharmacy computer system on 9/17/07 and these labels are affixed to the zip lock bag. Therefore, medications packaged by pharmacy staff and medications dispensed by the ADM now have the same information on the labels.